

#### U.S. DEPARTMENT OF ENERGY COMPUTATIONAL SCIENCE (CSGF) GRADUATE FELLOWSHIP PROGRAM STUDENT APPLICATION

**Instructions:** Refer to the current fellowship program description before completing the application. **Please note application materials must be postmarked by January 29, 1997.** Type or print application information clearly. A complete application consists of

- 1. Fellowship Application
- 2. Current Official Transcript(s) and Course Sheets

Note: Transcript(s) must be mailed by the university to the address below. If the applicant has already received a degree, the transcript should show evidence of completion of the degree program.

- 3. Career and Academic Goals and Objectives
- 4. Three (3) Confidential Reference Forms. Have forms completed by faculty members and sent directly to the address below.
- GRE Scores. The Educational Testing Service should send your Graduate Record examination (GRE) general
  aptitude scores directly to the address below. Seek GRE information promptly to ensure timely receipt of test
  results.

Please make sure that you have completed all parts of the application and have placed your signature where requested. Keep a copy of this application and supporting materials for your files.

#### Deadline - Materials must be postmarked by January 29, 1997

It is the applicant's responsibility to check with Krell Institute's CSGF office regarding the completeness of the application file. Incomplete applications will not be reviewed.

#### RETURN THE COMPLETED APPLICATION/CORRESPONDENCE TO:

Computational Science Graduate Fellowship Program (CSGF)
Krell Institute
P.O. Box 511
Ames, Iowa 50010
515-233-6867

Application information will be used solely for the purpose of selecting fellows and administering the program. Disclosure of this information is made subject to Public Law 93-579 (the Privacy Act of 1974) and U.S. Department of Energy. Regulations as published in the Federal Register on September 30, 1977, ff.



### U.S. DEPARTMENT OF ENERGY COMPUTATIONAL SCIENCE GRADUATE FELLOWSHIP PROGRAM STUDENT APPLICATION

For office	
use only	

STU	DENT	' DA	TA

(Mr/Ms)	(First)	(Middle)	(Last)	(Ext)
Social Security Number	r			
Current Academic Statu	[] Fir	st year Graduate Student st year PhD student ner (please specify)		
CURRENT COLLEG	E/UNIVERSITY _			
Advisor				
Department		Major		
City	State	Zip_	Pho	ne
CURRENT MAILING	G ADDRESS			
City	State	Zip_	Pho	nę
Address effective through: After this date, all correspondence will be sent to the permanent address listed below unless otherwise requested.				
E-MAIL ADDRESS_				
FAX NUMBER				
FAX NUMBERPERMANENT ADDR	RESS			
FAX NUMBERPERMANENT ADDR	RESS			
FAX NUMBERPERMANENT ADDR	RESS State		Phot	ne
FAX NUMBERPERMANENT ADDR City CITIZENSHIP U.S.Citizen: [ ] Yes	State	Zip	Phot	ne

#### **EDUCATION**

List Technical Schools, Universities/Colleges. Begin with most current institution.

INSTITUTION	DATES ATTENDED	MAJOR	DATE DEGREE RECEIVED/ EXPECTED	MONTH/YEAR

#### **GRADE POINT AVERAGE**

Undergraduate Cumulative GPA	Use 4.0 scale to compute ( $A=4$ , $B=3$ , $C=2$ , $D=1$ ). If your transcript uses
a different grading scale other than 4.0	(for example, 5.0 or 6.0) please normalize to 4.0.

Graduate GPA	. (	Use	same	scale	as	underg	rad	GPA'
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#### GRADUATE RECORD EXAMINATION

Verification of these scores is required. (Note: Official Graduate Record Examination (GRE) Scores must be sent directly by the Educational Testing Service to Krell Institute/Computational Science Graduate Fellowship program. Krell Institute's Institution Code is 6343)

CDE	TEST	DECL	TIT TC
LTK F.	1671	K C N	

TEST TAKEN/TO BE TAKEN	
	Date

EXAMINATION	SCORE	%
Verbal		
Quantitative		
Analytical		

#### UNIVERSITY PREFERENCE

University you plan to attend if awarded a fellowship. Any award will be contingent on attendance at the university identified below. *If, after submitting this application, you change your preferred university, please notify the CSGF office immediately.* 

UNIVERSITY PREFERENCE	ACADEMIC DISCIPLINE	TOPIC OF INTEREST

CSGF STUDENT APPLICAT	TION	NAME:		
EMPLOYMENT RECORD				
Begin with current or most rece	nt employment.			
EMPLOYER	FROM/TO	POSITION	NATURE OF WORK	
FEDERAL LAB/INDUSTRY	LAB EXPERIENCE			
EMPLOYER	FROM/TO	POSITION	NATURE OF WORK	
ACADEMIC AWARDS AND	HONORS			
Include undergraduate and grad	uate honors (if applicable)			
EXTRACURRICULAR ACT	IVITIES	-		
Include technical societies and s	service organizations (incl	ude offices held).		
REFERENCES				
List three persons familiar with your academic preparation and your technical abilities. Please have these individuals				

transmit the attached reference forms directly to Ames Lab.

3.

#### **CSGF STUDENT APPLICATION**

NAME:			

#### CAREER AND ACADEMIC GOALS AND OBJECTIVES

#### THIS INFORMATION IS VITAL TO THE OVERALL EVALUATION OF YOUR APPLICATION.

- 1. The Fellowship program defines "Computational Science" as "the use of high-performance computer technology in an innovative and essential way to address and advance the state of knowledge in a particular scientific or engineering applications discipline." In a brief paragraph, describe the field of computational science in which you plan to pursue your doctoral research and how it relates to the above definition. **Limit this to 300 words or less**.
- 2. Indicate how your Program of Study will meet the objectives of the fellowship program. (300 words or less)
- 3. In one or two short paragraphs (300 words or less), summarize how your interests, background, coursework and planned research will lead to a dissertation that meets the definition of computational science given above. Keep in mind the three disciplines in question 2 when composing your response. Be sure to specifically address the role of computation in your planned research.

1	CSCF	STUDENT	APPLICATION

List courses from your applied discipline (engineering, physics, etc.), other science, mathematics, and computer science courses that you **have** completed. Provide course title, credit hours, whether course was Graduate (G) or Undergraduate (UG) level, and grade earned. Please print or type clearly.

This form is used to facilitate the review of the applicant's academic record and performance in the applied disciplines, science, mathematics, and computer science.

COURSE TITLE	CREDIT HOURS QUARTER (Q) SEMESTER (S)	G/UG	GRADE
SCIENCE/ENGINEERING			
MATHEMATICS			
COMPUTER SCIENCE			

Grade Point Average for the above courses. (GPA basis: A = 4; B = 3; C = 2; D = 1)

CSGF STUDENT APPLICATION	NAMI	E:	
PROGRAM OF STUDY			
Please type or print clearly. Please see instructions on p. 6.			
CURRENT AND PLANNED COURSES THAT WILL M - Catalogue/course descriptions must be attached.  University		LOWSHIP PROGR	RAM OF STUDY
COURSE TITLE	COURSE NUMBER	G/UG	HOURS
SCIENCE/ENGINEERING			
	1		

MATHEMATICS				
COMPUTER SCIENCE				
I have read and approved this program of study.				

Signature	
Name of Graduate University Advisor (print)	



# Confidential Reference Form

RETURN BY <u>January 29, 1997</u> to:	Computational Science Graduate Fello Krell Institute P.O. Box 511	owship Program (CSGF)
Institution	Title	
Name	Date	
RECOMMENDER INFORMATION:		
plicant with respect to personal charac work with others, leadership potential) inality of research project design, lab sk	teristics (motivation, imagination & origir and scientific capabilities (fundamental kr ill, written & oral communication skills). I e of the applicant's character, attitude, abi	nality of thought, ability to nowledge in field, skill & orig- Please provide any comments
In a group of other science and math s	tudents of comparable age and experience	, how would you rate the ap-
How long and in what association have you know	n the applicant?	
Applicant's Last Name	First	Middle

Ames, IA 50010



# Confidential Reference Form

Applicant's Last Name	First	Middle
How long and in what association have you know	vn the applicant?	
plicant with respect to personal charac work with others, leadership potential) inality of research project design, lab sl	students of comparable age and experience cteristics (motivation, imagination & origin) and scientific capabilities (fundamental kikill, written & oral communication skills). It is of the applicant's character, attitude, abutist.	nality of thought, ability to nowledge in field, skill & orig- Please provide any comments
RECOMMENDER INFORMATION:		
Name	Date	
Institution	Title	
RETURN BY <u>January 29, 1997</u> to:	Computational Science Graduate Fello Krell Institute	owship Program (CSGF)

Ames, IA 50010



## Confidential Reference Form

Applicant's Last Name	First Name	Middle
How long and in what association have you know	wn the applicant?	
plicant with respect to personal chara work with others, leadership potential inality of research project design, lab s	students of comparable age and experience, how cteristics (motivation, imagination & originality and scientific capabilities (fundamental knowl kill, written & oral communication skills). Pleas re of the applicant's character, attitude, abilities atist.	of thought, ability to edge in field, skill & origon e provide any comments
RECOMMENDER INFORMATION:		
Name	Date	
Institution	Title	
RETURN BY <u>January 29, 1997</u> to:	Computational Science Graduate Fellowsh Krell Institute P.O. Box 511	ip Program (CSGF)

Ames, IA 50010

# APPLICANT DATA

(Optional)

Applicant data is important in assessing the effectiveness of our efforts to solicit applications from a diverse

			impletion and submission of this form will assist us in this regard, however, your failure to do so ecision regarding your application. We appreciate your cooperation.				
RACE							
	[	]	Caucasian (having origins in any one of the original peoples of Europe, North Africa, or the Middle East)				
	[	]	Black (having origins in any of the Black peoples of Africa)				
	[	]	Hispanic (of Mexican, Puerto Rican, Cuban, Central/South American or other Spanish culture of origin, regardless of race)				
	[	]	American Indian (having origins in any of the original peoples of North America, and maintaining cultural identification through tribal affiliation or community, recognition)				
	[	]	Asian or Pacific Islander (having origins in any of the original peoples of the Far East, Southeast Asia; the Indian Subcontinent, or the Pacific Islands; for example, India, China, Japan, Korea, Philippine Islands, and Samoa)				
SEX							
	[	]	Female [ ] Male				
BIRTH I	AT	Γ <b>E</b> (r	m/d/y):				
•			dicap (physical or mental impairment that substantially limits one or more major life activities; ss, deafness, or mobility impairment): [ ] Yes [ ] No				

### **Fellowship Survey Form**

### Dear Applicant:

Please complete this form and return it with your fellowship application. The information that you provide will allow us to target our advertising more effectively. This information is confidential and is not used in review of the fellowship application.

1.	How did y	you find out about the program?					
		[	]	Poster			
		[	]	Advertising in Journal (name of journal)			
		[	]	Word of Mouth from [ ] faculty [ ] student [ ] administrator			
		[	]	Laboratory Staff			
		[	]	Institutional Announcement			
		[	]	Conference or Meeting (name of meeting)			
		[	]	World Wide Web Pages			
		[	]	Other			
2. Have you applied for other fellowship programs?							
		[	]	From other sources			
				[ ] University-Sponsored (names of fellowships)			
				[ ] Other (NSF, DOD, etc.)			